## EST AVAILABLE COPY

								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000									29/1	600	(Ú2)	80		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAI TYPE		YTITY	OR	OTHER SMALL	l)		
TC	TAL CLAIMS							TE	FEE		RATE	FEE		
FO	R		NUMBER FILED NUMBER EXTRA				BASI	C FEE	355.00	OR	BASIC FEE	710.00		
то	TAL CHARGEA	BLE CLAIMS	∠/ minus 20= * × ×					9=		OR	X\$18=	4/8/2		
IND	EPENDENT CL	AIMS	@ minus 3 = * 3					0=		OR	X80=	246		
MU	LTIPLE DEPENI	DENT CLAIM PI	PRESENT					٠		1 1		370		
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	olumn 2	<u> </u>	35=		OR	+270=	11187		
"	* If the difference in column 1 is less than zero, enter "0" in column 2						TO	IAL		OR	TOTAL	14.210		
	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)						SM	ALL	ENTITY	OR	OTHER SMALL E			
AMENDMENT A	2 2 5 4 5 2 4 5 5	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
N O N	Total	. 47	Minus	** 4	17.	=	X\$	9=		OR	X\$18=			
AME	Independent	. 16	Minus	***	6	=	X4	0=		OR	X80=			
_	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	T CLAIM		+13	15			+270=			
								OTAL	<u> </u>	OR	TOTAL			
	(Column 1) (Column 2) (Column 3)							. FEE		OR	ADDIT. FEE			
DMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDI	Total	.48	Minus	** 4	7_	= /	X\$	9=		OR	X\$18=	18		
AMENI	Independent	· 6	Minus	*** (	0	=	X4	0=		OR	X80=			
	FIRST PRESE	NTATION OF MI	JLTIPLE DEP	PENDEN	T CLAIM		+13	35=		OR	+270=	,		
										OR	TOTAL ADDIJATEE	TK.		
(Column 1) (Column 2) (Column 3)							ADDIT					æ		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NOW	Total	. 49	Minus	4	8	= /	X\$	9=		OR	X\$18=	18.00		
AME	Independent	. 6	Minus	***	6	=	X4	0=		OR	X80=	,		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM			E				-		
*	If the entry in colur	mn 1 is less than t	ne entry in colu	mn 2, writ	e "0" in co	lumn 3.	+13	S5= OTAL		OR	+270= TOTAL			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

## BEST AVAILABLE COPY

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN		
TOTAL CLAIMS							1	RATE	FEE		RATE	FEE	
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
то	TAL CHARGEAE	BLE CLAIMS	minu	ıs 20=	*			X\$ 9≃		OR	X\$18=		
IND	EPENDENT CL	AIMS	minus 3 = *					X42=		OR	X84=		
ML	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						Į.	TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	OTHER SMALL		
AMENDMENT A	range las	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	<u> </u>	Minus	**46	1	= 2		X\$ 9=		OR	X\$18=	36.00	
AME	Independent	* 6	Minus	0 1				X42=		OR	X84=		
L.	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140=		OR	+280=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	3/200	
	(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT	17 (2) (a) (b)	NUN PREV	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 51	Minus	** 5	7	= //		X\$ 9=		OR	X\$18=		
	Independent	* 6	Minus *** =			= /		X42=		OR	X84=		
	THIST PRESE	RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /					ا ك	+140=		OR	+280=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FÉE		
		(Column 1)		(Colu	mn 2)	(Column 3)							
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ND S	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AMENDMENT	Independent	*	Minus	***	IT CLAIM	=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	IOLI IPLE DEF	CNUEN	TI ÇLANVI			+140=		OR	+280=		
								TOTAL		OR	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													